

No. W 30653	Due no later than May 31, 2005 Annual Report Form	2. Registered Agent and Office NO PO BOX																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable	JILL WILLIAMSON 10569B N FRIAR DR HAYDEN LAKE, ID 83835																		
	M & J MANAGEMENT LLC 10569B N FRIAR DR HAYDEN LAKE, ID 83835	3. <u>New</u> Registered Agent Signature																		
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Office held</th> <th style="width: 20%;">Name</th> <th style="width: 30%;">Street or P.O. Address</th> <th style="width: 10%;">City</th> <th style="width: 10%;">State</th> <th style="width: 15%;">Zip</th> </tr> </thead> <tbody> <tr> <td>Partner</td> <td>Jill Williamson</td> <td>10569B N. Friar Dr.</td> <td>Hayden</td> <td>ID</td> <td>83835</td> </tr> <tr> <td>Partner</td> <td>MARIANNE ELDEVIK</td> <td>1642 E. Tall Timberloop</td> <td>Post Falls</td> <td>ID</td> <td>83854</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	Zip	Partner	Jill Williamson	10569B N. Friar Dr.	Hayden	ID	83835	Partner	MARIANNE ELDEVIK	1642 E. Tall Timberloop	Post Falls	ID	83854
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5. Organized Under the Laws of: IDAHO W 30653	6. Signature <u>Jill Williamson</u> Date <u>3-17-05</u> Name (Typed or Printed) <u>Jill Williamson</u> Title <u>Partner</u>																			